



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 1208

| SERIAL NUMBER  | FILING or 371(c)<br>DATE  | CLASS   | GROUP ART UNIT            | ATTORNEY DOCKET<br>NO.  |                       |                            |
|--|---|---|---------------------------|---|-----------------------|----------------------------|
| 10/766,315   | 01/27/2004<br>RULE  | 705   | 4172                      | G08.070   |                       |                            |
| <b>APPLICANTS</b><br>Emerson P. Jones, Greenwich, CT;<br>Karen Schoen, New York, NY;<br><b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/492,558 08/05/2003<br>and claims benefit of 60/493,187 08/07/2003<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>06/17/2004 |   |   |                           |   |                       |                            |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /ANDREW A<br>VEZERIS/<br>Acknowledged Examiner's Signature  |   | <input type="checkbox"/> Met after<br>Allowance<br>Initials | STATE OR<br>COUNTRY<br>CT | SHEETS<br>DRAWINGS<br>4   | TOTAL<br>CLAIMS<br>21 | INDEPENDENT<br>CLAIMS<br>5 |
| <b>ADDRESS</b><br>BUCKLEY, MASCHOFF & TALWALKAR LLC<br>50 LOCUST AVENUE<br>NEW CANAAN, CT 06840<br>UNITED STATES   |   |   |                           |   |                       |                            |
| <b>TITLE</b><br>Method and apparatus for conducting a transaction  |   |   |                           |   |                       |                            |
| <b>FILING FEE<br/>RECEIVED</b><br>1090   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   |                           | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                       |                            |